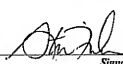


AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. FIS920000337US3 (14114Z)							
Applicant(s): Rama Divakaruni, et al.												
Application No. 10/775,441	Filing Date February 10, 2004	Examiner Steven Ho Yin Loke	Customer No. 23389	Group Art Unit 2811	Confirmation No. 9423							
Invention: TTO NITRIDE LINER FOR IMPROVED COLLAR PROTECTION AND TTO RELIABILITY												
<u>COMMISSIONER FOR PATENTS:</u>												
Transmitted herewith is an amendment in the above-identified application.												
The fee has been calculated and is transmitted as shown below.												
CLAIMS AS AMENDED												
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE							
TOTAL CLAIMS	4 -	20 =	0	x \$50.00	\$0.00							
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00							
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00							
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0458/IBM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.												
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
 _____ Signature			Dated: September 21, 2006									
Steven Fischman Registration No. 34,594 SCULLY, SCOTT, MURPHY & PRESSER, P.C. 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1459, Alexandria, VA 22313-1459" 37 CFR 1.8(a) on _____ (Date) </td> </tr> <tr> <td colspan="2" style="text-align: center;"> _____ Signature of Person Mailing Correspondence </td> </tr> <tr> <td colspan="2" style="text-align: center;"> _____ Typed or Printed Name of Person Mailing Correspondence </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1459, Alexandria, VA 22313-1459" 37 CFR 1.8(a) on _____ (Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
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CC:												

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. FIS920000337US3 (14114Z)	
Applicant(s): Rama Divakaruni, et al.					
Application No. 10/775,441	Filing Date February 10, 2004	Examiner Steven Ho Yin Loke	Customer No. 23389	Group Art Unit 2811	Confirmation No. 9423

Invention: **TTO NITRIDE LINER FOR IMPROVED COLLAR PROTECTION AND TTO RELIABILITY**

COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	4 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account **09-0458/IBM**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038.

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Signature

Steven Fischman
Registration No. 34,594

SCULLY, SCOTT, MURPHY & PRESSER, P.C.
400 Garden City Plaza, Suite 300
Garden City, New York 11530
(516) 742-4343

Dated: September 21, 2006

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(Date)

Signature of Person Mailing Correspondence

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